Complement mail this familiapgether with app

PART B-ISSUE FEE TRANSMITTA

PM82/0301

Box ISSUE FEE
Assistant Commissioner for Patents
Washington, D.C. 20231

BE BE

MARING INSTITUTION THIS form should be used for transmitting the ISSUE FEE. Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

CUPRENT CORRESPONDENCE ADDRESS (Note: Lagibly mark-up with any corrections or use Block 1)

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

Under the Papenwork Reduction Act of 1995, no persons are required to respond to a collection

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent.

Certificate of Mailing

Kenyon & Kenyon One Broadway

New York NY 10004

I hereby certify that this issue Fee Transmittal is being deposited with the Urited States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

4a. The following fees are enclosed (make check payable to Commissioner

of Patents and Trademarks):

O9/488,754 O1/21/OO O12 KRAMER, D 3613 O3/O1/O First Named Applicant RUDOLF, 35 USC 154(b) term ext. = O Days. TILE OF DUAL - MODE TWIN - CHAMBER THRUST BEARING HAVING HYDRAULIC DAMPING ATTY'S DOCKET NO.: CLASS-SUBCLASS BATCH NO. APPLN TYPE SMALL ENTITY FEE DUE DATE DUE					<u> </u>	<u> </u>	(Signature)
O9/488,754 O1/21/00 O12 KRAMER, D 3613 O3/01/O First Named RUDOLF, 35 USC 154(b) term ext. = O Days. TLE OF VENTION DUAL -MODE TWIN-CHAMBER THRUST BEARING HAVING HYDRAULIC DAMPING ATTY'S DOCKET NO. CLASS-SUBCLASS BATCH NO. APPLN. TYPE SMALL ENTITY FEE DUE DATE DUE 2 22750/429 267-140.130 C82 UTILITY NO \$1240.00 O6/01/O 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.383). Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Fee Address" indication (or "Fee Address" indication form PTO/SB/47) attached.					/ 5-/	10/01	(Date)
Applicant RUDOLF, 35 USC 154(b) term ext. = 0 Days. TLE OF VENTION DUAL-MODE TWIN-CHAMBER THRUST BEARING HAVING HYDRAULIC DAMPING ATTY'S DOCKET NO. CLASS-SUBCLASS BATCH NO. APPLN. TYPE SMALL ENTITY FEE DUE DATE DUE 2 22750/429 267-140.130 C82 UTILITY NO \$1240.00 06/01/0 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/S8/122) sittached. Change of correspondence address findication (or "Fee Address" Indication form PTO/S8/47) attached. Change of correspondence address findication form PTO/S8/47) attached. Change of correspondence address findication for "Fee Address" Indication form PTO/S8/47) attached. Change of correspondence address findication form PTO/S8/47) attached. Change of correspondence address findication form PTO/S8/47) attached. Change of correspondence address findication for "Fee Address" Indication form PTO/S8/47) attached. Change of correspondence address findication for "Fee Address" Indication for "Fee Address"	APPLICATION NO.	FILING DATE	TOTAL CLAIMS	3	EXAMINER AND GROU	P ART UNIT	DATE MAILED
Applicant RUDULF, 35 USC 154(b) term ext. = 0 Days. TLE OF VENTION DUAL -MODE TWIN-CHAMBER THRUST BEARING HAVING HYDRAULIC DAMPING ATTY'S DOCKET NO. CLASS-SUBCLASS BATCH NO. APPLN TYPE SMALL ENTITY FEE DUE DATE DUE 2 22750/429 267-140.130 C82 UTILITY NO \$1240.00 06/01/0 1. Change of correspondence address or indication of " Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required. (1) the names of up to 3 registared patent attorneys or agents OR, atternatively, (2) the name of a single film (having as a member a registered attorney or agent) and the names of up to 2 registared patent attorneys or agents OR, atternatively, (2) the name of a single film (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no	09/488,754	01/21/00	012	KRAMER,	D	361	03/01/01
ATTY'S DOCKET NO. CLASS-SUBCLASS BATCH NO. APPLN. TYPE SMALL ENTITY FEE DUE DATE DUE 2 22750/429 267-140.130 C82 UTILITY NO \$1240.00 06/01/0 Change of correspondence address or indication of "Fee Address" (37 CFR 1.383). Use of PTO form(s) and Customer Number are recommended, but not required. Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTC/SB/122) attached. **Gendant State of the Number of the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorney or agents of up to 2 registered patent attorneys or agents. If no name is listed, no			35 U	SC 154(b)	term ext.	= 0 [Days.
ATTY'S DOCKET NO. CLASS-SUBCLASS BATCH NO. APPLN. TYPE SMALL ENTITY FEE DUE DATE DUE 2 22750/429 267-140.130 C82 UTILITY NO \$1240.00 06/01/0 Change of correspondence address or indication of "Fee Address" (37 CFR-1.363). Use of PTO form(a) and Customer Number are recommended, but not required. 1 2 For printing on the patient front page, list (1) the names of up to 3 registered patient attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents of up to 2 registered patient attorneys or agents. If no name is listed, no	LEOF DUAL -MODE TW	TN-CHAMBER TH	IRUST REA	RING HAVE	NG HYDRAIL I	C DAMPTA	IG
2 22750/429 267-140.130 C82 UTILITY NO \$1240.00 06/01/0 Change of correspondence address or indication of "Fee Address" (37 CFR 1.383). Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2. For printing on the patent front page, list (1) the names of up to 3 registared patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registared patent attorneys or agents. If no name is listed, no	ENTION DOWLETTIONE TWO	TIA-CUMUDEK IN	INUS I BEA	WING UNAT	NG FIDRAULI	C DAMPIN	iG .
2 22750/429 267-140.130 C82 UTILITY NO \$1240.00 06/01/0 Change of correspondence address or indication of "Fee Address" (37 CFR 1.383). Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) sitached. 2. For printing on the patent front page, list (1) the names of up to 3 registared patent attorneys or agents OR, alternatively, (2) the name of a single film (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no	•						
2 22750/429 267-140.130 C82 UTILITY NO \$1240.00 06/01/0 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) sitached. 2. For printing on the patent front page, list (1) the names of up to 3 registared patent attorneys or agents OR, alternatively, (2) the name of a single film (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no							
2 22750/429 267-140.130 C82 UTILITY NO \$1240.00 06/01/0 Change of correspondence address or indication of "Fee Address" (37 CFR 1.383). Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single film (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no							*
Change of correspondence address or indication of " Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) sitached. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single film (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no	ATTYS DOCKET NO	CI ASS SI IBCI ASS	BATCHNO	APPIN TYPE	SMALL ENTITY	· FEE DUR	DATERUE
Use of PTO form(s) and Customer Number are recommended, but not required. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single film (having as a member a registered attorney or agent) The Address' indication (or "Fee Address' Indication form PTO/SB/47) attached.	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
Use of PTO form(s) and Customer Number are recommended, but not required. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single film (having as a member a registered attorney or agent) PTO/SB/122) sittached. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single film (having as a member a registered attorney or agent) and the names of up to 3 registered patent attorneys or agents. If no name is listed, no			<u> </u>				
□ Change of correspondence address (or Change of Correspondence Address form PTC/S8/122) attached. the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no	2 22750/429	267-140.	130 C8	2 UTILI	TY NO	\$1240.0	00 06/01/01
PTC/SB/122) attached. member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no	2 22750/429 Change of correspondence address of	267-140.	130 C8	2 UTILI 2. For printing on (1) the names of	TY NO the patent front page, ils up to 3 registered patent	\$1240.0	00 06/01/01
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached. attorneys or agents. If no name is listed, no	2 22750/429 Change of correspondence address of Use of PTO form(s) and Customer No.	267-140 por indication of "Fee Address umber are recommended, but	130 C8 7 (37 CFR 1.363). t not required.	2 UTILI 2. For printing on (1) the names of attorneys or age	TY NO the patent front page, lis- up to 3 registered paten nts OR, alternatively, (2	\$1240.0	00 06/01/01
	2 22750 / 429 Change of correspondence address of Use of PTO form(s) and Customer Nu.	267-140 por indication of "Fee Address umber are recommended, but	130 C8 (37 CFR 1.363). t not required.	2 UTILI 2. For printing on (1) the names of attempts or age the name of a member a regis	TY NO the patent front page, list up to 3 registered patent rits OR, atternatively, single firm (having as a tered attorney or agent)	\$1240.0	00 06/01/01
	2 22750/429 Change of correspondence address of Use of PTO form(s) and Customer Nu. Change of correspondence address PTO/SB/122) attached.	267-140 and indication of "Fee Address sumber are recommended, but as (or Change of Corresponded)	130 C8 (37 CFR 1.363). t not required.	UTILI 2. For printing on (1) the names of attorneys or age the name of a member a regisand the names of and the names of a regisand the n	TY NO the patent front page, list up to 3 registered patent rits OR, atternatively, (2 single firm (having as a tered attorney or agent up to 2 registered patent	\$1240.0	00 06/01/01

Inclusion of assignee data is only appropriate when an assignment has been previously submitted to Issue Fee the PTO or is being submitted under separate cover. Completion of this form is NOT a substitue for filing an assignment. □ Advance Order - # of Copies. (A) NAME OF ASSIGNEE Firma Carl Freudenberg
(B) RESIDENCE: (CITY & STATE OR COUNTRY) 4b. The following fees or deficiency in these fees following be charged to: DEPOSIT ACCOUNT NUMBER _ Weinheim, Federal Republic of Germany
Please check the appropriate assignee category indicated below (will not be printed on the patent) (ENCLOSE AN EXTRA COPY OF THIS FORM) XX Issue Fee XXAdvance Order - # of Copies The COMMISSI ONER OF FATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above. (Authorized Signature) =Richard/L. Mayer (Reg. No. NOTE; The Issue Fee will not be accepted from anyone other than the applicant, a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office. Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary 05/15/2001 MLAKEW2 00000159 110600 09488754 depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark 1240.00 CH Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS 30.00 CH ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

TRANSMIT THIS FORM WITH FEE

PTOL-85B (REV.10-98) Approved for use through 06/30/99. OMB 0651-0033

of information unless it displays a valid OMB control number.

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE